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U.S. Application No. 09/899,577

Title: Histogram Adjustment Features for Use in Imaging Technologies

Filing Date: July 5, 2001

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Fax Transmittal Cover Sheet (1 page)

Statement Under 37 CFR 3.73(b) (1 page)

Revocation of Power of Attorney with New Power of Attorney and Change of
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PTO Fax Number: 703.872.9306

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Krzysztof Zakilka, Mikhail Trifonov, Olga SharonovaApplication No./Patent No.: 08/899,577 Filed/Issue Date: Jul 5, 2001 / NAEntitled: Histogram Adjustment Features for Use in Imaging TechnologiesJasc Corporation Incorporated

(Name of Assignee)

a corporation

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %
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A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 012257, Frame 0372, or for which a copy thereof is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

5/12/04
Date

(952) 294-2349

Telephone number

Jennifer Kessler

Typed or printed name

Jennifer Kessler
Signature

Secretary and Corporate Counsel

Title

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Application Number	08/099/577
Filing Date	7/6/2001
First Named Inventor	Zaklika
Art Unit	
Examiner Name	
Attorney Docket Number	JASC005-USP

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: **45346**

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: **45346**

OR

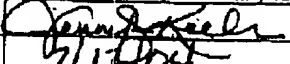
<input type="checkbox"/> Firm or Individual Name			
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Address			
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Jennifer Keeler, Secretary for Jasc Software, Inc.		
Signature			
Date	7/1/04		
Telephone	852-294-2549		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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